



Docket No.: J5460.0016/P016
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
John L. Janning

Application No.: Not Yet Assigned

Filed: Concurrently Herewith

Art Unit: N/A

For: METHOD OF FABRICATING A ZENER
DIODE CHIP FOR USE AS A SHUNT IN
CHRISTMAS TREE LIGHTING

Examiner: Not Yet Assigned

**PETITION TO MAKE SPECIAL
UNDER 37 CFR 1.102(d)**

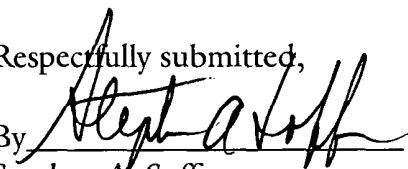
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

John L. Janning, Applicant in the above-entitled application for Letters Patent, hereby petitions the Commissioner for an order directing the above Application be made special for the reason that the Applicant is over sixty-five (65) years of age, evidenced by the attached copy of Mr. Janning's birth certificate. No fee is required with this petition. 37 C.F.R. § 1.102(c).

Dated: August 5, 2003

Respectfully submitted,

By 
Stephen A. Soffen

Registration No.: 31,063
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OSHINSKY LLP
2101 L Street NW
Washington, DC 20037-1526
(202) 785-9700

PLACE OF BIRTH

Montgomery

STATE OF
DEPARTMENT OF
DIVISION OF VITAL STATISTICS

CERTIFICATE OF BIRTH

1015

Registration Number 904

File No.

Montgomery District 8390

Registration No.

St. Louis, Mo. Dr. 7 Ward

(If born abroad in a hospital or institution, give name and number)

FULL NAME OF CHILD

John Lassie Janning

If child is not yet named, make
supplementary report, as directed

SEX MALE	YEAR 1978	NUMBER IN ORDER OF BIRTH (To be answered only in case of plural birth)	SEX YES	DATE OF BIRTH (Month) 3 - (Day) 30 (Year) 7
TILL NAME Eugene Janning		FAMILY NAME Gretta Leesie		MOTHER
RESIDENCE RESIDING P. O. ADDRESS 1029 1/2 Roosevelt St.		RESIDENCE RESIDING P. O. ADDRESS Same		
AGE IN MONTHS WHITE	AGE AT LAST BIRTHDAY 21 (Years)	COLOR OR RACE WHITE	AGE AT LAST BIRTHDAY 22 (Years)	
BIRTHPLACE DAYTON, OHIO.		BIRTHPLACE Caldwells, Ohio		
OCCUPATION AND INDUSTRY Housewife		OCCUPATION AND INDUSTRY HOUSEWIFE		
NUMBER OF CHILDREN BORN AND LIVING Number of children born alive in the number mentioned the child (if born alive)		NUMBER OF CHILDREN OF THIS MOTHER LIVING, INCLUDING ONE CHILD (if born alive)		Is child originally deformed? Was Prophylactic Ophthalmia Management used? YES

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child born on April 12, 1978 and the
(Month) (Year)MIDWIFE ALIVE (Born Alive or Stillborn)Where there was no attending physician
or midwife, then the father, householder,
etc., should make this return. A stillborn
child is one that breathes, but
shows other evidence of life after birth.

Given name added from a supplemental report

APR 12 1978

PHYSICIAN OR MIDWIFE

REGISTRATION

I HEREBY CERTIFY THE ABOVE TO BE A TRUE AND COMPLETE
PHOTOGRAPHIC REPRODUCTION OF THE CERTIFICATE ON FILE
IN THE OFFICE OF THE COMBINED HEALTH DISTRICT 03-91
MONTGOMERY COUNTY, DAYTON, OHIO.THIS CERTIFICATE IS NOT VALID
UNLESS SEALED BY LOCAL REGISTRAR